



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application Number : 09/511,362 Confirmation No.: 4127

Applicant : SULLIVAN

Filed : February 23, 2000

Title : MUTUAL FUND CARD METHOD AND SYSTEM

TC/Art Unit : 3624

Examiner: A. L. BASHORE

RECEIVED

Docket No. : 47004.000067

JUN 25 2004

Customer No. : 21967

GROUP 3600

REQUEST FOR RECONSIDERATION UNDER 37 C.F.R. § 1.111

MAIL STOP: AMENDMENT

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

Sir/Madam:

I. Introductory Comments

In response to the non-final Office Action issued on April 21, 2004 (“Office Action”), Applicant respectfully requests reconsideration on the basis of the amendment and remarks set forth herein. Applicant submits that the application is in condition for allowance, and respectfully requests same.

Applicant greatly appreciates the courtesies extended by the Examiner during the interview conducted on June 9, 2004, which Applicant believes was very helpful in advancing prosecution of this application.

Amendment to the claims begins on page 2 of this paper.

Remarks/Argument begin on page 9 of this paper.



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June 23, 2004

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Transmitted herewith is an amendment in the above-identified application. Fees have been calculated as shown below:

CLAIMS AS AMENDED						
	Claims Remaining After Amendment	Highest Number Previously Paid For	Extra	Rate		Amount
				Large Entity	Small Entity	
Number of Claims in Excess of 20	33	59	0	\$ 18.00	\$ 9.00	\$ 0.00
Independent Claims in Excess of 3	4	4	0	\$ 86.00	\$ 43.00	\$ 0.00
First Presentation of Multiple Dependent Claims				\$ 290.00	\$ 145.00	\$ 0.00
Extension Fee:	a) One Month			\$ 110.00	\$ 55.00	\$ 0.00
	b) Two Months			\$ 420.00	\$ 210.00	\$ 0.00
	c) Three Months			\$ 950.00	\$ 475.00	\$ 0.00
	d) Four Months			\$1480.00	\$ 740.00	\$ 0.00
	e) Five Months			\$2010.00	\$1005.00	\$ 0.00
Other:						\$ 0.00
TOTAL FEE DUE						\$ 0.00

- No additional fee is required.
 A check in the amount of \$ _____ is attached.
 Charge \$ _____ to Deposit Account No. 50-0206.
 Charge any additional fees or credit any overpayment to Deposit Account No. 50-0206.

Small Entity Status Claim: is hereby requested. is of record in this application.

Respectfully submitted,

By:


Stephen T. Schreiner
Registration No. 43,097

STS/bvh